

Is Our Lifestyle Killing Us?

A health advocate speaks out on why we are ailing



Byllie Y. Avery

By Marjorie Whigham

The health of Black America is in a state of crisis—especially the health of Black women. A disproportionate number of us are suffering from chronic illnesses—kidney and heart disease, diabetes, cancer and nutritional deficiencies, to name just a few.

To find out why our health is in such a precarious state and to learn what we can do individually and collectively to meet our health-care needs, *ESSENCE* talked with Byllie Y. Avery, executive director of the National

Black Women's Health Project (NBWHP). A grass-roots self-help organization, NBWHP was created in 1980 to focus attention on the plight of health care in Black America in general, and to have a positive impact on the quality of health among Black women in particular. The motto of NBWHP best sums up what the goal of all Black women should be: "Empowerment Through Wellness."

We asked Byllie Avery to discuss how we can all move closer to the organization's motto.

ESSENCE: What would you say is the overall condition of Black women's health in America today?

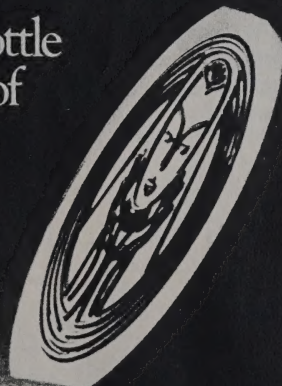
AVERY: Collectively, Black women have

about the poorest health of all American-born people. It has been estimated that 9 to 10 million of us are victims of chronic conditions such as hypertension, diabetes, lupus, obesity, nutritional deficiencies, kidney disease and heart disease—and they're mostly due to lifestyle. Many Black women are victims of types of cancer that can be avoided.

For instance, the cervical cancer rate among Black women is increasing while it is decreasing among white women. Cervical cancer can be cured, but Black women are not taking the preventive steps: having Pap smears done, or going back for follow-up examinations if their Pap smears indicate a

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problem. This is the number-one problem, and it crosses all socioeconomic lines. Second, we need to educate Black women—mothers and their daughters—about the fact that early sexual activity often leads to cervical cancer.

ESSENCE: *Why is this kind of cancer so prevalent among us?*

AVERY: Cervical cancer is due to many factors, but one of them is early sexual intercourse. The introduction of anything into an immature cervix—be it sperm or a penis—influences its development and predisposes it to cancer. To combat having this problem in later life, we need to tell our young women to abstain from intercourse until after the age of 21.

Secondly, having multiple sex partners throws you open to venereal warts (condylomata) and other sexually transmitted diseases. Instead of trying to teach pregnancy prevention through fear of pregnancy, we need to do it through truth, and the frightening truth is that early sex can give you cancer.

ESSENCE: *Are there other illnesses that could be prevented if we went for regular checkups?*

AVERY: Yes. Take, for instance, breast cancer. Here's a very shocking statistic: Although more white women get breast cancer, more Black women die from it. This, once again, is a curable disease if detected early. But most of us don't examine our breasts on a monthly basis. As I speak to women around the country, I ask how many of them

have been shown how to do their monthly breast self-examinations. Most of them have, but when you ask how many of them actually do it, out of a group of 25 to 30 women you may have only one or two who do it routinely.

ESSENCE: *Why, then, are we neglecting our health?*

AVERY: Black women get so much negative feedback in our culture. For many Black women, any time that you can take for yourself is a luxury that you can ill afford. But what we should be asking ourselves is: "Do I have time to die?" We've got to change our priorities around and place as much emphasis on our health as we do on everyone and everything else. But as women we've been conditioned to believe that putting ourselves first is selfish. Until we feel that we deserve this kind of treatment, we won't take care of ourselves.

Also, Black women are in very stressful situations. Many of us are heads of families, and all of us must cope with racism, sexism and class differences. Thus, often our psychological stress manifests itself in physical illnesses.

ESSENCE: *In spite of all the recent advances in medical technology, the health of Black America compared with that of the rest of the population is the worst it's been in 15 years, although there are more health-care systems in place for us now than previously. Why aren't they meeting our needs? And should we be looking to them to fulfill our needs?*

AVERY: I think we do need to look to the health-care systems, because we have one of the best and most sophisticated health technologies in the world. And we are justified in demanding that these meet the needs of all the people. Now, where should that direction come from? The National Black Women's Health Project has emphasized that the direction should come from the affected population working in conjunction with the health-care provider.

We must look at ourselves within the context of the institutions that we live in in this country, make an analysis, and develop our own programs as to how we need to be treated. Finally, we must implement the program that best serves our needs within the larger health-care system, in conjunction with the health-care provider. We must ask questions of our doctors, get them to explain what is wrong with us in a way that we can understand, and not be afraid to seek the opinion of another health-care professional.

ESSENCE: *What should our health-care concerns be? And what should we be doing to improve our health?*

AVERY: First, I think that we have to look at who we are mentally and emotionally, because that component controls the rest of us. We must look at the stressors. We must look at our mental well-being in terms of what our current living, working and economic situations are.

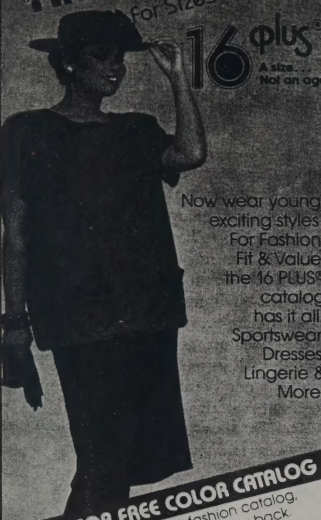
Second, we must make a large turnaround in our lifestyle, and we [CONTINUED ON PAGE 26]

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GOOD HEALTH

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must make it quickly. Many of the things that are killing us are due to that lifestyle. We need to make a commitment to change the way we cook and what we eat. I maintain that we must make capitalism work for us. If we stop buying what the fast-food restaurants that invade our communities are selling us, and change what we want to eat, then they will change what they sell us. This is where we can be in control. Every woman must make a commitment to start making changes with herself and her family—that's where the education process starts. Then she'll need the support of other sisters while she's making those changes. As we start to change you'll see that our neighborhoods will start to change. What they're selling us will start to change. Then our psyche, and our mental and physical energy will also start to be transformed.

Third, we must take a holistic approach to our health. The way of Western medicine is to treat the body, then send us somewhere else to treat our mental and emotional health. So even those of us who go to the doctor end up being treated just for the symptoms of illness, and not the stresses of the environment in which we struggle. We cope with these stresses the best way we can, but often the best way of coping is not the healthiest way.

ESSENCE: *What is needed to begin making use of resources that have a positive impact on the quality of our health?*

AVERY: In order for us to have a positive impact on our health, the process of empowerment has to occur first. What we need to do is grow together as a group of women, working together to help each sister utilize the best of all the resources she has at her disposal. We can only move toward collective wellness through individual wellness.

I think our goal must be to offset diseases such as high blood pressure, diabetes, obesity, nutritional deficiency, heart disease and other stress-related illnesses. We must make those individual lifestyle changes that affect the quality of our personal health: that means getting a Pap smear and exercising caution with sex partners; getting prenatal care before it's almost time to have the baby; quitting smoking, cutting down on alcohol and eliminating drugs; and being aware of and educated about our health and sharing that information with our children and our men.

It is essential that we pull our health off the back burner and make it our first priority. We must realize that we can have control over our lifestyle and its effects on us. Every Black woman must begin to take charge and take care of her health. ♦

For more information, contact the National Black Women's Health Project, 1237 Gordon St., Atlanta, Ga. 30310.

Marjorie Whigham is health and fitness editor of *ESSENCE*.

TOTAL WELL-BEING

● FERTILITY HELP AVAILABLE

For the many women who postpone having children until they are in their thirties, the chances of getting pregnant may be reduced. Studies show that fertility decreases with age, especially for women over 35. To help women who have trouble conceiving, a variety of ovulation-test kits have been developed for home use that enable a woman to determine in advance when she will ovulate. The tests work by detecting an increase in the hormone LH, which triggers ovulation (the release of an egg into the fallopian tubes), so the chances of accurately predicting the onset of ovulation are greatly improved.

These test kits, available in supermarkets and drugstores, can also be used by women who practice the natural family-planning method of birth control—if you know when you're ovulating, you'll know when to abstain from intercourse.

Most of the test kits have a disposable applicator that indicates an increase in hormone level by a change in color, much like the home pregnancy-test kits. ProCare Industries makes a kit called Woman's Choice, which contains 24 swab-test sticks for about \$9.95 and can predict ovulation two to four days before its onset. Ovutime by Advance Care Products predicts ovulation 24 to 36 hours in advance and is available in two sizes—a six-test kit for women with regular menstrual cycles, which costs between \$35 and \$39; and a nine-test kit recommended for women with irregular cycles, which costs about \$55 to \$59. Tambrands' kit, First Response Ovulation Predictor Test, determines ovulation 12 to 24 hours in advance. The cost ranges from \$24 to \$35 for a six-day test kit; a three-day refill is \$15. The choice is yours! For more information on ovulation and fertility, write for "A Woman's Guide to Fertility," a free pamphlet available from E.P.I.C., 500 N. Michigan Ave., Chicago, Ill. 60611.

—DARI GILES

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Famed comedian-turned-diet-guru Dick Gregory has resolved the dieting dilemma with his new Bahamian diet. A powdered nutrient supplement you add to fruit juice, his 100-percent-natural health product can help you lose five to ten pounds the first week and three to five the following weeks, depending on your body size and metabolism. Gregory's diet drink contains no diuretics, amphetamines or preservatives. It does contain date and carob powders, sea vegetables, wheat- and rice-bran extracts and vitamins. A 16-ounce can (ten-day supply) of Gregory's Bahamian Diet sells for \$19.95 and is available by sending a check or money order to Dick Gregory Health Enterprises, Inc., P.O. Box 72399, Chicago, Ill. 60678-2399. You can also pay by Visa or MasterCard. Here's to a slimmer you! —PEGGY TAYLOR

